

Building Address: 15510 Woodbine Road  
Woodbine Md 21797

Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_

Census Tract: 111111 Subdivision: Woodbine

Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: \_\_\_\_\_

Tax Map: \_\_\_\_\_ Parcel: 228 Grid: \_\_\_\_\_

Zoning: PC Map Coordinates: \_\_\_\_\_ Lot Size: 112 N

Existing Use: \_\_\_\_\_

Proposed Use: Home Office

Estimated Construction Cost: \$ 150,000.00

Description of Work: 1 1/2 story Home w/ full basement

Occupant or Tenant: \_\_\_\_\_

Was tenant space previously occupied?  Yes  No

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Property Owner's Name: \_\_\_\_\_

Address: 104 East 2nd St

City: MD State: MD Zip Code: 21771

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Applicant's Name & Mailing Address, (If other than stated herein): \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Contractor Company: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

License No.: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Engineer/Architect Company: \_\_\_\_\_

Responsible Design Prof.: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

**BUILDING DESCRIPTION - COMMERCIAL**

Building Characteristics	Utilities
Height:	<u>Water Supply</u>
No. of stories:	<input type="checkbox"/> Public
Gross area, sq. ft./floor:	<input type="checkbox"/> Private
	<u>Sewage Disposal</u>
Area of construction (sq. ft.):	<input type="checkbox"/> Public
	<input type="checkbox"/> Private
Use group:	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
<u>Construction type:</u>	<u>Heating System</u>
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
<input type="checkbox"/> Masonry	<u>Sprinkler System:</u>
<input type="checkbox"/> Wood Frame	<input type="checkbox"/> N/A
<input type="checkbox"/> State Certified Modular	<input type="checkbox"/> Full
<input checked="" type="checkbox"/> <b>Roadside Tree Project Permit</b>	<input type="checkbox"/> Partial
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Other Suppression
<b>Roadside Tree Project Permit #</b>	No. of Heads:

**BUILDING DESCRIPTION - RESIDENTIAL**

Building Characteristics	Utilities
<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	<u>Water Supply</u>
<u>Depth</u> <u>Width</u>	<input type="checkbox"/> Public
1 <sup>st</sup> floor:	<input type="checkbox"/> Private
2 <sup>nd</sup> floor:	<u>Sewage Disposal</u>
Basement:	<input type="checkbox"/> Public
<input type="checkbox"/> Finished Basement	<input type="checkbox"/> Private
<input checked="" type="checkbox"/> Unfinished Basement	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Crawl Space	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Slab on Grade	<u>Heating System</u>
No. of Bedrooms:	<input type="checkbox"/> Electric
<u>Multi-family Dwelling</u>	<input type="checkbox"/> Oil
No. of efficiency units:	<input type="checkbox"/> Natural Gas
No. of 1 BR units:	<input type="checkbox"/> Propane Gas
No. of 2 BR units:	
No. of 3 BR units:	
Other Structure:	
Dimensions:	
Footings:	<input checked="" type="checkbox"/> <b>Roadside Tree Project Permit</b>
Roof:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> State Certified Modular	<b>Roadside Tree Project Permit #</b>
<input checked="" type="checkbox"/> Manufactured Home	

HE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN HIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Date: 11/3/11

Title/Company: \_\_\_\_\_

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

\*\*PLEASE WRITE NEATLY & LEGIBLY\*\*

-FOR OFFICE USE ONLY-

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA ( Zoning )		
PSZA ( Engineering )		
Health	<u>12/14/11</u>	<u>R. Buick</u>
Fire Protection		

**DPZ SETBACK INFORMATION**

Front: \_\_\_\_\_

Rear: \_\_\_\_\_

Side: \_\_\_\_\_

Side St.: \_\_\_\_\_

All minimum setbacks met?  Yes  No

Is Entrance Permit Required?  Yes  No

Historic District?  Yes  No

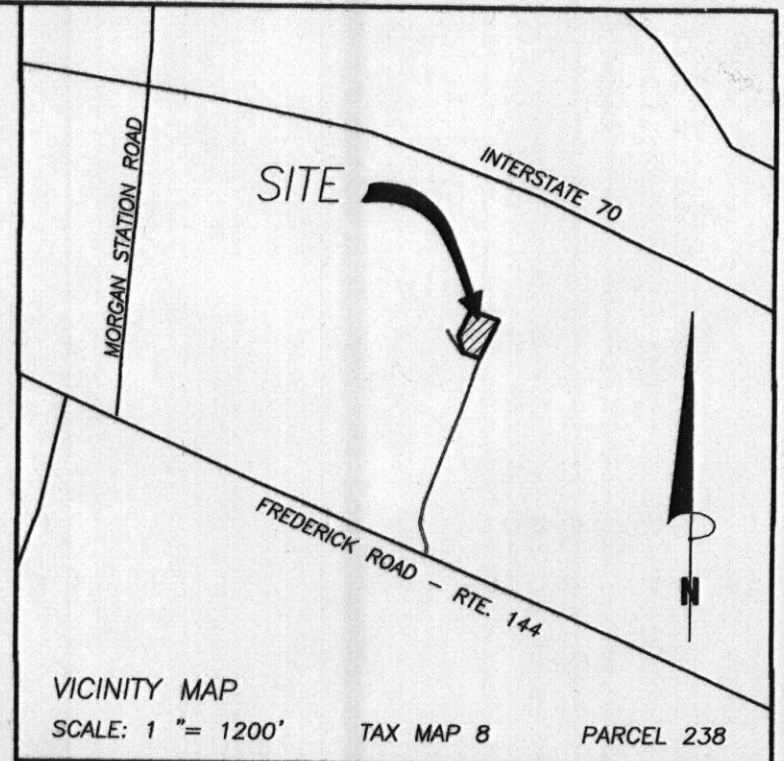
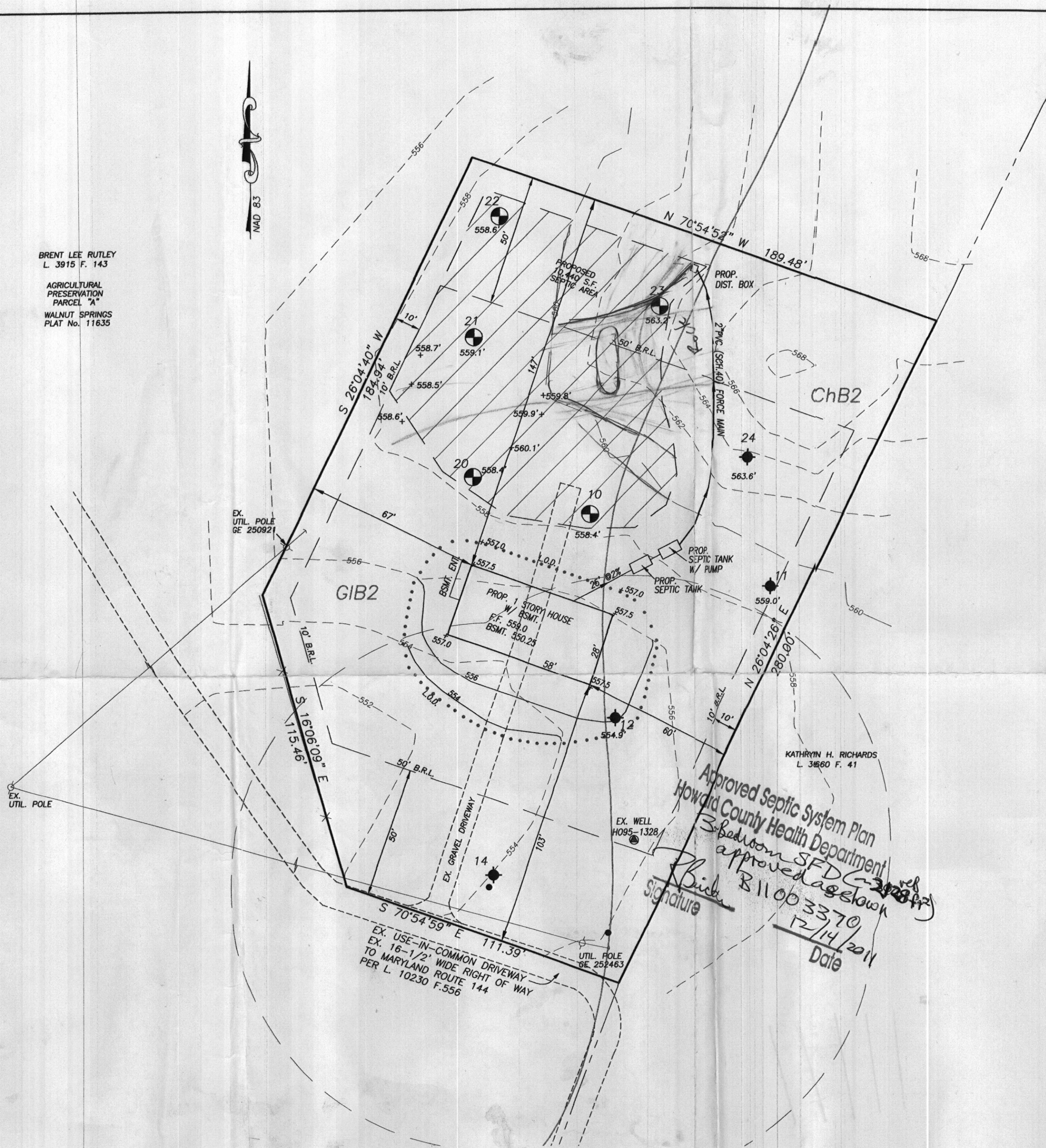
Lot Coverage for New Town Zone: \_\_\_\_\_

SDP/Red-line approval date: \_\_\_\_\_

Filing Fee	\$ <u>100.00</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$ <u>50.00</u>
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$

BRENT LEE RUTLEY  
L. 3915 F. 143  
AGRICULTURAL  
PRESERVATION  
PARCEL "A"  
WALNUT SPRINGS  
PLAT No. 11635

NAD 83



VICINITY MAP  
SCALE: 1" = 1200' TAX MAP 8 PARCEL 238

- NOTES:
1. TOPOGRAPHY IS FIELD RUN BY VANMAR ASSOC., INC.
  2. ACTUAL LENGTH AND NUMBER OF TRENCHES FOR SEWERAGE ARE TO BE DETERMINED AT THE TIME OF SEPTIC SYSTEM PERMIT ISSUANCE.
  3. PROPOSED HOUSE IS 3-BEDROOM.
  4. LIMIT OF DISTURBANCE: 4,900 Sq. Ft.
  5. THE EXISTING WELL SHOWN ON THIS PLAN HO-95-1328 HAS BEEN FIELD LOCATED BY VANMAR ASSOCIATES, INC. PROFESSIONAL LAND SURVEYORS AND ACCURATELY SHOWN.

SEPTIC ELEVATIONS

PROPOSED HOUSE:  
F.F. ELEV. = 559.0  
BSMT. ELEV. = 550.25  
INV. OUT = 555.0

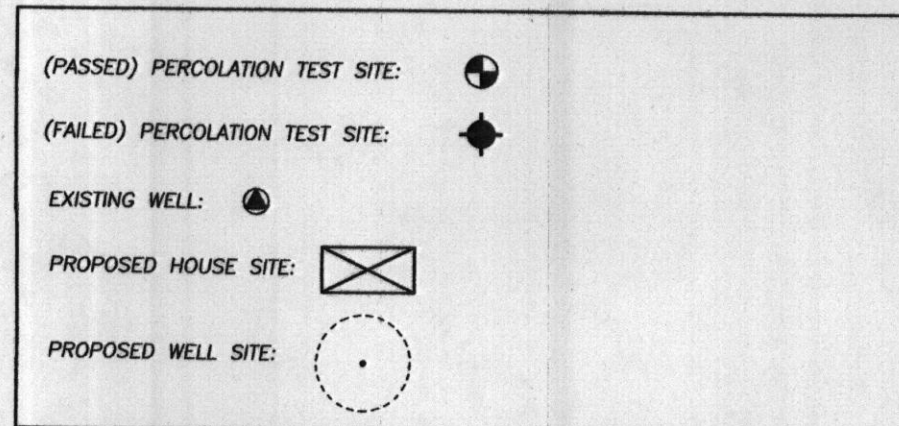
PROPOSED SEPTIC TANK:  
EX GRD. ELEV. = 557.5  
PROP. GRD. ELEV. = 557.5  
INV. IN = 554.5  
INV. OUT = 554.2

PROPOSED SEPTIC TANK W/PUMP:  
EX GRD. ELEV. = 558.3  
PROP. GRD. ELEV. = 557.5  
INV. IN = 554.0

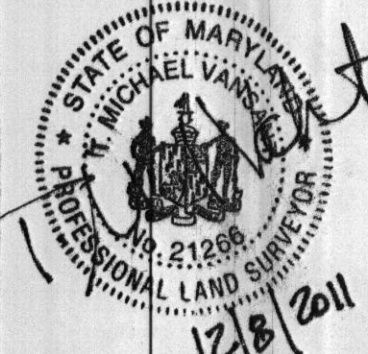
PROPOSED DISTRIBUTION BOX:  
EX GRD. ELEV. = 563.5  
INV. IN = 559.0  
INV. OUT = 559.5

OWNERS:  
DORMAN BUILDERS INC.  
104 EAST RIDGEVILLE BLVD.  
MT. AIRY, MARYLAND 21771  
301-831-5114

Approved Septic System Plan  
Howard County Health Department  
3 Bedroom SFD  
approved as shown  
Signature: [Signature]  
Date: 12/14/2011



DATE	REVISIONS

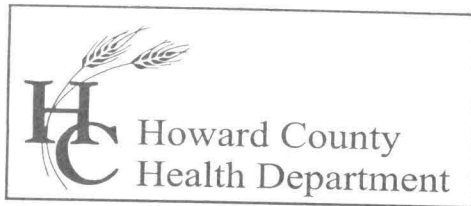


PLOT PLAN  
**DORMAN LOT**

LIBER 10230 FOLIO 556  
15210 FREDERICK ROAD  
ELECTION DISTRICT No. 4  
HOWARD COUNTY, MARYLAND  
SCALE: 1" = 30' DECEMBER, 2011

**VANMAR ASSOCIATES, INC.**  
Engineers Surveyors Planners  
310 South Main Street P.O. box 328 Mount Airy, Maryland 21771  
(301) 829 2890 (301) 831 5015 (410) 548 2751

I HEREBY CERTIFY THAT THESE DOCUMENTS WERE PREPARED BY ME OR UNDER MY RESPONSIBLE CHARGE, AND THAT I AM A DULY LICENSED PROFESSIONAL LAND SURVEYOR UNDER THE LAWS OF THE STATE OF MARYLAND, LICENSE NO. 21266, EXPIRATION DATE 9/9/13.



Bureau of Environmental Health  
7178 Columbia Gateway Drive, Columbia, MD 21046  
(410) 313-2640 Fax (410) 313-2648  
TDD (410) 313-2323 Toll Free 1-866-313-6300  
website: www.hchealth.org

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Penny E. Borenstein, M.D., M.P.H., Health Officer

December 15, 2006

**MEMORANDUM**

TO: C J Dorman  
Dorman Builders, Inc.  
13220 Old Annapolis Road  
Mount Airy, Maryland 21771  
Faxed to 301-831-5250

FROM: Stuart F. Oster, R.S.  
Bureau of Environmental Health  
Well and Septic Program

RE: 15210 Frederick Road  
Woodbine – 1.126 Ac.  
Map 8, Grid 8, Parcels 238

This is to advise that the Howard County Health Department recommends issuance of the demolition permit for the above referenced properties. The existing well may possibly be utilized for replacement house. By accepting this demolition recommendation, you agree to the following conditions set forth by the Health Department:

Before demolition, the well that served the existing house must be properly disconnected and sealed off. Also, protective devices placed around them to prevent any future damage. These precautions should remain in place during the demolition and construction phases. The well (Unknown condition and tag number) will have to meet current COMAR (26.04.04) construction standards before it can be reconnected to the new house. Otherwise, it will need to be abandoned.

Because of its age, unknown condition and design, the septic system will need to be properly abandoned; i.e. pumped, collapsed and filled in with clean fill. A new septic system will have to be established through our Development Coordination Section and a 10,000 Sq. Ft. septic reserve area established before a building permit can be approved.

A new septic permit will need to be obtained. A well inspection will be required for final approval when reconnecting to the new house. Additionally, applicable water tests for issuance of an ICOP will be needed. If any other wells or septic systems are found during site work, please notify this office immediately.

Cc: File